

## PART B - FEE(S) TRANSMITTAL

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7590

12/30/2003

Sughrue  
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(Depositor's name)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/020,953	12/19/2001	Antonio L. Romero	A8170	1144

TITLE OF INVENTION: BATTERY HAVING TUBE COLLAPSING VENT SYSTEM AND OVERCHARGE PROTECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/30/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MAPLES, JOHN S	1745	429-061000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**SUGHRUE MION,  
 PLLC**

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ALCATEL

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

PARIS, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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(Authorized Signature)

Brian W. Hannon

(Date)

3-29-04  
Reg. 32,778

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03/31/2004 WASFAW2 00000050 10020953

01 FC:1501

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